

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. _____

STATE OF CONNECTICUT
DEPARTMENT OF HEALTH SERVICES
BUREAU OF HEALTH SYSTEM REGULATION
DIVISION OF MEDICAL QUALITY ASSURANCE

In re: Joan Mealey, L.P.N.
License No. 022884
660 South 8th Street - Apt. A4
Tacoma, WA 98465

Petition No. 920602-11-011

AMENDED CONSENT ORDER

WHEREAS, Joan Mealey of Tacoma, Washington has been issued license number 022884 to practice as a licensed practical nurse by the Department of Health Services pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and

WHEREAS, Joan Mealey hereby admits and acknowledges that:

1. On or about January 23, 1990, she entered into a Consent Order with the Connecticut Board of Examiners for Nursing whereby her license was placed on probation of three (3) years.
2. The Consent Order required among other things that she not use alcohol or any drugs that had not been prescribed for her for a legitimate purpose by a licensed health care practitioner.
3. During May, 1992 the Connecticut Board of Examiners for Nursing was notified that she had relapsed and had diverted opiates from her place of employment, the Tacoma Lutheran Home in Tacoma, Washington.
4. She holds a licensed practical nurse license in the State of Washington and she is currently on probation in that state.

5. She has informed the Department of Health Services and the Connecticut Board of Examiners for Nursing that she wishes to surrender her Connecticut license and by surrendering such, she will not be fulfilling the terms of the Consent Order referenced in paragraph 1. above.
6. She is licensed as a nurse only in Connecticut and Washington and does not have licensure pending in any other state.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, Joan Mealey hereby stipulates and agrees to the following:

1. That she waives the right to a hearing on the merits of this matter.
2. That her license number 022884 to practice as a licensed practical nurse in the State of Connecticut is hereby surrendered.
3. That if she seeks to reinstate her license at any time in the future, she must apply to the Department of Health Services and the Connecticut Board of Examiners for Nursing. The Department of Health Services and the Connecticut Board of Examiners for Nursing shall have absolute discretion as to whether to reinstate the license and whether her said license shall be returned to a probationary status.
4. That this Consent Order is effective the first day of the month immediately following the date said Consent Order is ordered and accepted by the Connecticut Board of Examiners for Nursing.
5. That she understands this Consent Order is a matter of public record.
6. That she understands this Consent Order may be considered as evidence of the above admitted violations in any proceeding before the Connecticut Board of Examiners for Nursing (1) in which her compliance with this same order is at issue. or (2) in which her compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue.

7. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, that said order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive her of any other rights that she may have under the laws of the State of Connecticut or of the United States.
8. That she permits a representative of the Public Health Hearing Office of the Division of Medical Quality Assurance, Department of Health Services to present this Consent Order and the basis for said Consent Order to the Connecticut Board of Examiners for Nursing. She understands that the Connecticut Board of Examiners for Nursing has complete and final discretion as to whether an executed Consent Order is approved or granted.
9. That she understands she has the right to consult with an attorney prior to signing this document.

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I, Joan Mealey, have read the above Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Joan L. Mealey
Joan Mealey

Subscribed and sworn to before me this 11th day of January, 1993

Cynthia L. Skiles
Notary Public or person authorized
by law to administer an oath or
affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 19th day of January 1993 it is hereby accepted.

Stanley K. Peck
Stanley K. Peck, Director
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the 28th day of January 1993, it is hereby ordered and accepted.

BY:

Janice Thibodeau
Connecticut Board of Examiners for Nursing

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